

SHORT ARTICLE

Perceived Medical, Social, and Psychological Issues due to the COVID-19 Pandemic among Elderly: A Descriptive Analysis

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ABSTRACT

Elderly individuals are more likely to suffer from both short and long-term consequences of COVID-19, including exacerbation of existing illnesses, psychological issues, and increased risk of death. This study aimed to understand the medical, perceived psychological, and social health problems faced by the elderly due to the COVID-19 pandemic. This hospital-based study included 225 elderly patients (aged ≥60 years) with chronic health conditions. Hypertension (70.2%) and diabetes mellitus (64.0%) were the most common morbidities among the study participants. At least 34.7% of the participants had one or more symptoms suggestive of psychological problems due to COVID-19 pandemic. Among the participants, 56.9% had difficulty with routine activities, 10.2% had trouble accessing medications and 8% faced issues in receiving routine medical care. There is a need to protect the interests of the elderly and suggest potential preventive measures and solutions for their medical, social and psychological problems.

KEYWORDS

Chronic Morbidity; Elderly; COVID-19; Psychological; Social; Medical

INTRODUCTION

Globally, the first case of Corona Virus Disease of 2019 (COVID-19) was reported on December 31, 2019, from China.(1) The first case in India was reported from Kerala on January 27, 2020. (2) As of April 2024, 4.5 crore cases have been reported in India.(3) Though all age groups and

both genders have been affected by this pandemic, the older population with morbidities like diabetes mellitus, hypertension, cardiovascular diseases and cancer have been affected to a greater extent, with a higher incidence of morbidity and mortality due to COVID-19. Deaths due to

COVID-19 were predominant among the 50-70 years age group across Indian states, with highest deaths being observed in the 61-70 years age group.(4) The COVID-19 pandemic imposed major challenges, including a complete lockdown implemented to control the pandemic, which limited healthcare access. Measures such as isolation, quarantine, and travel restrictions had many direct and indirect effects on the health and psychosocial well-being of the elderly. This also resulted in reduced access to promotive, preventive, and clinical care, among the elderly exacerbating their chronic condition.(5) Routine check-ups, compliance with treatment and lifestyles modifications are vital for chronic diseases management. Hence, the current study aimed to examine the medical, psychological and social problems faced by the elderly with chronic health conditions due to the COVID-19 pandemic and suggest solutions to tackle these issues in the future. Implementing these solutions can help mitigate the impact of future pandemics on the elderly, enhancing their overall well-being and resilience. Objective of this study was to investigate the perceived medical, psychological and social issues experienced by elderly individuals with chronic health conditions due to COVID-19 pandemic

MATERIAL & METHODS

The present cross-sectional study was conducted among 225 elderly patients aged ≥ 60 years, with one or more chronic health conditions. Purposive sampling was used to identify elderly individuals (both male and female) attending out-patient or in-patient facilities of the Department Medicine under a tertiary care hospital in southern India and out-patient facilities under the Department of Community Medicine during the months of

June-December 2022. The sample size for the study was estimated based on results of a study from Bangladesh where in 23 % of elderly faced difficulty in accessing medications during COVID-19. (5) Anticipating similar results with a relative precision of 25% and a non-response of 10%, a sample size of 225 individuals was determined.

An ethical clearance was obtained prior to study initiation. Permission was sought from the Heads of the Department of Community Medicine and Medicine before the initiation of the study. Permission was also obtained from the medical superintendent of the hospital. Written consent was obtained after a clear explanation of study objectives using a participant information sheet. The data was collected using a semi-structured questionnaire. The questionnaire included details on health-seeking behavior during the COVID-19 pandemic, social problems, symptoms suggestive of psychological problems, details of chronic morbidities and participants’ opinion on how the healthcare services can be improved in the context of future COVID-19 pandemic. Socioeconomic status was assessed using modified BG Prasad Scale. (6)

Statistical analysis: The data was entered and analyzed using Statistical Package for Social Sciences (SPSS) version 16. Frequency and proportions were used to report study findings.

RESULTS

The study included a total of 225 elderly patients with chronic health conditions. The sociodemographic characteristics of the study participants are depicted in Table 1.

Table 1 Sociodemographic characteristics of the study participants n = 225

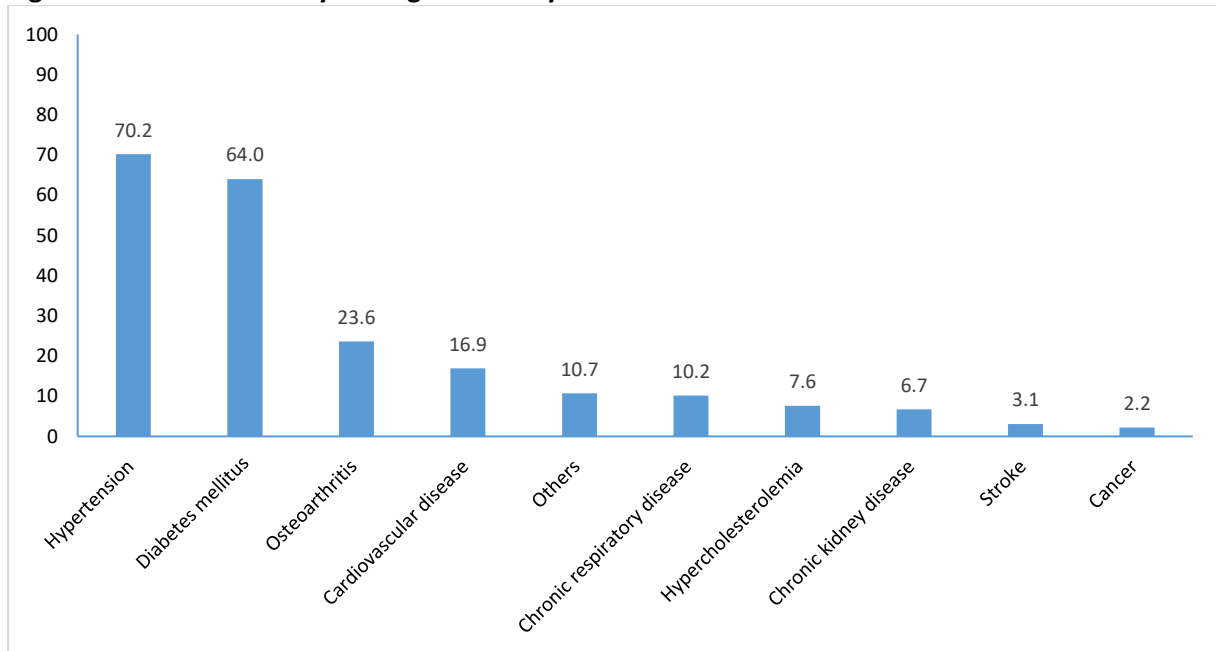
Variables	Category	Males n =123 n(%)	Females N =102 n(%)
Age in years	60-70	79(64.4)	67(65.9)
	71-80	30(24.5)	33(32.4)
	>80	14(11.1)	2(1.7)
Marital status	Married	119(6.7)	89(87.3)
	Widowed	3(2.4)	13(12.7)
	Unmarried	1(0.8)	0(0)
Education	Illiterate	7(5.7)	16(15.7)

Variables	Category	Males n =123 n(%)	Females N =102 n(%)
Socioeconomic status	1-5years	16(13.8)	11(10.8)
	6-10years	33(26.8)	38(37.3)
	PUC	37(30.1)	27(26.5)
	Degree	29(23.6)	10(9.8)
	Upper	33(26.8)	26(25.5)
	Upper middle	25(20.3)	25(24.5)
	Middle	28(23.6)	27(27.5)
	Lower middle	25(21.1)	17(16.7)
Residence	Lower	10(8.1)	6(5.9)
	Rural	76(61.8)	67(66.7)
Occupation	Urban	47(38.2)	34(33.3)
	Employed	73(59.3)	3(2.9)
Living arrangements	Homemaker	0(0)	85(83.3)
	Retired	35(28.5)	4(4.9)
	unemployed	15(12.1)	9(8.8)
	With family	120(97.6)	99(97.1)
	Without family	3(2.4)	3(2.9)

Among the participants, 146 (79.2%) were between 60-70 years old and 208 (92.4%) were married. One-third of participants (33.1%) had received 6-10 years of schooling and belonged to the upper socioeconomic class as per modified BG Prasad scale. Among the participants, 143(76.2%) were from rural

areas, and 76(33.7%) were currently employed. The majority of the participants 219(97.3%) lived with their family. Hypertension and diabetes mellitus were the most common morbidities among the study participants, as shown in Figure 1.

Figure 1 Chronic morbidity among the elderly n=225



At least 34.7% of the participants had one or more symptoms suggestive of psychological problems due to COVID-19 pandemic. The symptoms included: Tiredness 78(34.7%), stress 64(28.4%), anxiety

38(16.9%), panic and fear 29 (12.9%), loneliness 28 (12.4%), feeling sad 26(11.6%). Table 3 shows the social problems faced by the elderly during the pandemic.

Table 3 Social problems faced by the participants due to COVID-19 pandemic n=225

Social problems	n (%)
Effect on routine activities	128 (56.9)
Effect on social relationships with friends and neighbours	100 (44.4)
Limitation in access to money	68 (30.2)
Received unreliable information/ fake rumours	58 (25.8)
Stigma with respect to COVID-19	50 (22.2)
Limitation in access to food	40 (17.8)
Quarantined / isolated	34 (15.0)
Alcohol user (n=35)*	
<i>Unchanged</i>	19 (54.3)
<i>Decreased</i>	12 (34.3)
<i>Increased</i>	4 (11.4)
Tobacco use (n=32) †	
<i>Unchanged</i>	22 (68.7)
<i>Decreased</i>	10 (31.3)
<i>Increased</i>	0 (0)

Footnote: *190 (84.4%) were non-users of alcohol and †193(85.8%) were non-users of tobacco

Among the elderly, 12.8% reported having suffered from COVID-19, 10.2% had difficulty accessing medications, 8% faced difficulty receiving routine medical care, 0.9% developed new chronic health condition. The predominant source of health care during the COVID-19 period was private health facilities (96.6%). About 18 (8%) were hospitalized during the COVID-19 period with the median duration of hospital stay being five days.

Participants were asked about the possible solutions to problems faced in case of future pandemics. Among the participants, 66.2% of them mentioned that they would prefer to have home delivery of medications. Telemedicine consultations were suggested by 62.6% of the participants. Having dedicated OPD services unaffected by pandemics was considered a requirement by 52.8% of the participants. Providing telephonic consultation was mentioned by 40.4% of the participants.

DISCUSSION

India is undergoing a rapid demographic transition, with an increasing proportion of elderly individuals. Healthy ageing is possible

only when the medical, psychological, and social needs of the elderly are thoroughly considered by policy makers. The present hospital-based study provides insight into the problems faced by the elderly in the context of COVID-19.

The present study results found that hypertension and diabetes are the most common morbidities among the elderly. A multisite study conducted across Indian states among adults also found that hypertension (56%) and diabetes (43%) are the most common morbidities. (7) As our study population is elderly, the prevalence of above-mentioned morbidities was higher as compared to the aforementioned study, which consisted of all adults aged 20 years and above. The present study found that 70.2% of the participants reported having at least one morbidity. A similar study conducted among the elderly in Bangladesh, including 1032 individuals, found that 58.9% had a single condition. (5) These findings can be attributed to geographic variations in chronic disease prevalence and the specific characteristics of the populations studied.

The study from Bangladesh also found that one-fourth of the participants had problems related to accessing medicines (23%) and obtaining usual medical care (27%) during the pandemic, which was higher than the present study findings.(5) Another study from India which surveyed 2335 adults (mean age 57.8 years) across four cities including Delhi, Chennai, Haryana and Vizag with chronic health conditions found that, 83.1% reported problems pertaining to accessing healthcare and 17% faced difficulties while accessing medicines. (7) A study from Odisha, an Indian state consisting of individuals aged 18-77 years, found that 61% faced difficulty in reaching hospitals, and 47% had difficulty accessing pharmacies.(8)These findings highlight the significant impact of COVID-19 on healthcare access and indirectly reveal the effectiveness of the local health authorities’ response to the pandemic in these areas. A study among the elderly from New Jersey found that the most common challenges were limitations on social interactions (42.4%) and

restrictions on activities (38.9%) which is similar to the present study findings. (9) Among the present study participants, 16.9% reported having anxiety, 12.9% reported having panic, and 12.9% reported having fear. However, a multisite study including adults aged 20 years and above found that 59.3% had fear and anxiety related to COVID-19. The study also found that 0.9% faced stigma related to COVID-19. (7) These findings are in contrast to present study results, which observed that almost a quarter of the population (22.2%) faced stigma due to COVID-19. A study from Ethiopia found that, 22.8% of chronic disease patients faced psychological issues due to COVID-19. The study included all adults aged 18 years and above with one or more chronic diseases.(10) These results underscore the importance of addressing psychological issues to ensure that affected individuals can recover and thrive both during and after the pandemic.

While the present study found that 12.8% suffered from COVID-19, with 8% being hospitalized during the COVID-19 period, a study conducted among four states of India reported much lower proportions (2.7% and 0.7%). (7) These variations could be due to differences in characteristics of population included as well as geographic spread of COVID-19 pandemic in this area.

CONCLUSION

Elderly individuals with chronic health conditions faced problems in receiving medical care during COVID-19 pandemic. To ensure health systems can provide continuous medical care during future pandemics, it is essential to implement innovative strategies such as telemedicine services, community support networks, and home-based healthcare provision, which can effectively deliver care to the elderly in pandemic settings. Psychological evaluation and providing necessary support should be part of the routine care for elderly individuals with chronic diseases.

RECOMMENDATION

Qualitative studies, such as focus group discussions among elderly people having

chronic health conditions, can help gain in-depth understanding of the problems they faced due to COVID-19. Qualitative research methods, including in-depth interviews with various stakeholders such as doctors, family members, hospital administrators and policy makers can help identify solutions to the challenges faced by the elderly and mitigate them.

LIMITATION OF THE STUDY

As the present study was hospital based and conducted at a single tertiary care center, generalization of the study findings needs to be done with caution. The authors recommend conducting future multicentric studies with a representative sample of elderly individuals to address this limitation. The study was done during the receding phase of pandemic during the year 2022, and hence some of the study findings may have been affected by recall bias. Objective criteria were not used for evaluation of psychological problems, which may have affected the study results.

RELEVANCE OF THE STUDY

Elderly individuals are more likely to suffer from short and long-term consequences of COVID-19, including the exacerbation of existing illnesses, impacts on psychological well-being, and an increased risk of death. Understanding the needs of the elderly will help us to plan requisite interventions for this vulnerable group. This will improve the quality of health services and enhance care for the elderly.

AUTHORS CONTRIBUTION

SDM, AK, EK & RRS: conceived and designed the study; KJ: collected the data. KJ, KK, EK, SDM: analysis and interpretation of data. All authors participated in drafting the manuscript, reviewing and revising and approved the final version.

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CONFLICT OF INTEREST

There are no conflicts of interest.

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DECLARATION OF GENERATIVE AI AND AI ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

During the preparation of this work, the authors used Microsoft Copilot to make grammatical corrections. After using this tool, the authors reviewed and edited the content as needed and take full responsibility for the content of the publication.

REFERENCES

1. Archived: WHO Timeline - COVID-19 Report. [(accessed on Aug 25 2024)]; Available online: <https://www.who.int/news/item/27-04-2020-who-timeline--covid-19>
2. Andrews MA, Areekal B, Rajesh KR, Krishnan J, Suryakala R, Krishnan B, et al. First confirmed case of COVID-19 infection in India: A case report. *Indian J Med Res.* 2020;151(5):490-492.
3. Total cases of COVID-19 in India. [(accessed on Aug 25 2024)]; Available online: <https://www.worldometers.info/coronavirus/country/india/>
4. Lewnard JA, Mahmud A, Narayan T, Wahl B, Selvinayagam TS, Mohan B C, et al. All-cause mortality during the COVID-19 pandemic in Chennai, India: an observational study. *Lancet Infect Dis.* 2022;22(4):463-472.
5. Mistry SK, Ali ARMM, Yadav UN, Ghimire S, Hossain MB, Das Shuvo S, et al. Older adults with non-communicable chronic conditions and their health care access amid COVID-19 pandemic in Bangladesh: Findings from a cross-sectional study. *PLoS One.* 2021;16(7):e0255534.
6. Majhi MM, Bhatnagar N. Updated B.G Prasad's classification for the year 2021: consideration for new base year 2016. *J Family Med Prim Care.* 2021;10(11):4318-4319.
7. Singh K, Kondal D, Mohan S, Jaganathan S, Deepa M, Venkateshmurthy NS, et al. Health, psychosocial, and economic impacts of the COVID-19 pandemic on people with chronic conditions in India: a mixed methods study. *BMC Public Health.* 2021;21(1):685.
8. Sahoo KC, Kanungo S, Mahapatra P, Pati S. Non-communicable diseases care during COVID-19 pandemic: A mixed-method study in Khurda district of Odisha, India. *Indian J Med Res.* 2021;153(5&6):649-657.
9. Heid AR, Cartwright F, Wilson-Genderson M, Pruchno R. Challenges Experienced by Older People During the Initial Months of the COVID-19 Pandemic. *Gerontologist.* 2021;61(1):48-58.
10. Addis SG, Nega AD, Miretu DG. Psychological impact of COVID-19 pandemic on chronic disease patients in Dessie town government and private hospitals, Northeast Ethiopia. *Diabetes Metab Syndr.* 2021;15(1):129-135.